## REST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

09801495

CLAIMS AS FILED - PART								SMALL ENTITY			OTHER THAN		
(Column 1)						(Column 2)		TYPE		OR SMALL ENTITY			
TOTAL CLAIMS 24								RATE	FEE		RATE	FEE	
FOR NUMBER FILED					NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS 24 minus 20=					•	4		X\$ 9=	36	OR	X\$18=		
INDEPENDENT CLAIMS 4 minus 3 =					•	•		X40=	40	OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	0	OR	+270=		
• If the difference in column 1 is less than zero, enter						olumn 2		TOTAL	431	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
		(Column 1)	1	(Colui		(Column 3) I	1			) 		ADDI-	
AMENDMENT A		REMAINING AFTER AMENDMENT	·	NUM PREVIO PAID	BEA OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
	Total	.24	Minus	• 6	74			X\$ 9=		OR	X\$18=		
	Independent	.3	Minus	•••	4	=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	CLAIM			+135=		OR	+270=		
·								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	?	
(Column 1) (Column 2) (Column 3)													
AMENDMENT B	· · ·	CLAIMS REMAINING AFTER		HIGH NUM PREVI	IEST IBER OUSLY	PRESENT EXTRA	וו	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total	· 23	Minus	PAID	FOR /	- /C	1	X\$ 9=	FEE	OR	X\$18=	FEE	
	Independent	.3	Minus	***	4	- /	1	X40=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-/	500		<del>-/</del>	
·								+135=		OR	+270=		
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVII . PAID	OUSLY	PRESENT EXTRA	·	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		•		X\$ 9=		OR	X\$18=		
	Independent	• /	Minus	***		=	11	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.405			.270		
* If the entry in column 1 is less than the entry in column 2, write "t" in column 3.													
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."  ADDIT. FEEOROTALOROTALOROTALOR													
	n the Trighest Nur The Trighest Nur	mber Previously Pa mber Previously Pa	id For (Total or	o orace rindspend	is ioss vid lent) is the	n 3, enter 3. highest numb	er tou	and in the app	propriate box	in co	luma 1.		